

ELIGIBILITY CHECKLIST (GAF version)

Division of Mental Health, Developmental Disability and Substance Abuse Services

Name _____

Case # _____ Date ____/____/____

ADULT MENTAL HEALTH CHECK LIST

- ☐ Individual is 18 or over
(Proceed if yes; to Child Mental Health if no)
- Level I**
- ☐ A. 1 year diagnosable DSM IV psychiatric disorder
- ☐ B. acute and major impairment in ability to function
- ☐ C. GAF Score of 30 or lower
IF A, B AND C CHECKED, THEN LEVEL I
- LEVEL II**
- ☐ A. DSM IV psychiatric disorder
AND
- ☐ B. ____ GAF score of 50 or lower --- OR---
____ GAF score between 51 - 70 and service dependency
- OR
- ☐ C. ____ DSM IV psychiatric disorder and dual disability
or ____ GAF score over 50 and dual disability
IF A AND B CHECKED THEN LEVEL II OR
IF C CHECKED THEN LEVEL II
- LEVEL III**
- ☐ A. Diagnosable DSM IV psychiatric disorder
AND
- ☐ B. GAF Score of 70 or lower
- LEVEL IV**
- ☐ A. Known risk of developing an emotional disorder

ADULT SUBSTANCE ABUSE CHECK LIST

- ☐ Individual is 18 or over
(Proceed if yes; to Child Substance Abuse if no)
- Level I**
- ☐ A. 3 year history and DSM IV dependence diagnosis
- ☐ B. More than 3 episodes of restrictive treatment w/ relapses
- ☐ C. GAF Score of 30 or lower
IF A, B AND C CHECKED, THEN LEVEL I
- LEVEL II**
- ☐ A. DSM IV dependence diagnosis
AND
- ☐ B. ____ GAF score of 50 or lower --- OR---
____ GAF score between 51 - 70 and service dependency
- OR
- ☐ C. ____ DSM IV substance abuse disorder and dual disability
or ____ GAF score over 50 and dual disability
IF A AND B CHECKED THEN LEVEL II OR
IF C CHECKED THEN LEVEL II
- LEVEL III**
- ☐ A. DSM IV abuse or dependency disorder
AND
- ☐ B. GAF Score of 70 or lower
- LEVEL IV**
- ☐ At known risk of developing a substance abuse disorder

CHILD MENTAL HEALTH CHECKLIST

- ☐ Individual is under 18 years old
(Proceed if yes, to Adult Mental Health if no)
- LEVEL I**
- ☐ A. ____ Over age 10; >12 mo. ____ Age 10 or under; >3 mo
diagnosable DSM IV OR diagnosable DSM IV
psychiatric disorder psychiatric disorder OR
____ Age 5 or under; significantly atypical development
- ☐ B. ____ Out of home place- OR ____ Immediate risk of out of
ment within last 12 mo. home placement
- ☐ C. Total CAFAS score = or > 60
IF A,B AND C CHECKED, THEN LEVEL I
- LEVEL II**
- ☐ A. ____ Diagnosable OR ____ Age 5 or under, signif-
DSM IV icantly atypical development
- ☐ B. ____ Residential treatment or in-home supervision for
psychiatric disorder within last 12 mo.
____ Serious suicide attempt within last 12 mo.
____ Total CAFAS score =>30
____ Total CAFAS score < 30 and service dependency
- LEVEL III**
- ☐ A. ____ Diagnosable OR ____ Age 5 or under, signif-
DSM IV icantly atypical development
- ☐ B. Total CAFAS Score = or > 10
IF A AND B CHECKED THEN LEVEL III
- LEVEL IV**
- ☐ At known risk of developing an emotional or substance abuse disorder

CHILD SUBSTANCE ABUSE CHECK LIST

- ☐ Individual is under 18
(Proceed if yes; to Adult Substance Abuse if no)
- LEVEL I**
- ☐ A. 1 year history and DSM IV dependency diagnosis
- ☐ B. Total CAFAS score = or > 60
IF A and B CHECKED, THEN LEVEL I
- LEVEL II**
- ☐ A. DSM IV abuse or dependency diagnosis
AND
- ☐ B. ____ Total CAFAS score =>30
____ Total CAFAS score < 30 and service dependency
OR
- ☐ C. ____ DSM IV substance abuse disorder and dual disability
or ____ Total CAFAS < 30 and dual disability
IF A AND B CHECKED THEN LEVEL II OR
IF C CHECKED THEN LEVEL II
- LEVEL III**
- ☐ A. DSM IV abuse or dependence disorder
AND
- ☐ B. Total CAFAS score = or > 10
- LEVEL IV**
- ☐ At known risk of developing a substance abuse disorder

Signature and Date _____

Age/Disability _____ Level of Eligibility _____